#### STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

RECEIVED

JUL 25 2018

I. Name of Lobbyist(s)	Dario	Scalco
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PLEASE PRINT

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1. Name of Lobbyis	1(s) Dario Scalco		NEW HAMPSHIRE
II. Name of lobbyis	t's partnership, firm or corporation, if	any:	IDETACHMENT OF STA
The Profes	sional Fire Fighters of ame of partnership, firm or corporation)	f New Hampshi	re
	re St. Concord N Street) (Town/City)	H 03301	
Business Address: (	Street) (Town/City)	(State)	(Zip Code)
( <b>603</b> <u>333-3</u> (Telephone)	304 (603 <u>23-33</u> (Fa	310 e-mail <u>dan (</u>	o@pffnh.org
	covers: (Choose one – file separate repo transactions which are not attributable		ay file a separate report for
All reportable tra	ansactions occurring in the months prior to	o the reporting date relative to th	e following client:
The Prote	Ssional Fire Fight of (Full Name of Client as it appears on the L	of New Hamp	shire
<u>OR</u>	••	,	
☐ All reportable tra unrelated to any part	nsactions by the lobbyist (including the lo icular client.	bbyist's family), or the lobbying	g firm listed below which are
IV. Date of Report	April 25, 2018 🗆	July 25, 2018	
Reports cover: act	ivity from date of registration to 3/31/18	activity from 4/1/18 to 6/30/18	
	October 31, 2018   activity from 7/1/18 to 9/30/18	January 30, 2019 [] activity from 10/1/18 to 12/31,	/18
V. There have bee If this box is checked Concord, NH 03301.	en no fees received and no reportable, complete just this form and submit it to	e transactions made since the Secretary of State's Office, S	he last report.   Grate House, Room 204,
VI. Check if addition	onal reports are attached:		
_	ived fees or made expenditures, you must	file Addendum A- Fees and Ex	xpenses
	an honorarium or reimbursed expenses, y		
•	a, or your family has made political contri	butions, you must file Addendu	m C- Political Contributions
I have read RSA 15,	ffirmation by Lobbyist RSA 15-B, RSA 14-C and RSA 664 and	hereby swear or affirm that the f	oregoing information is true
and complete to the	best of my knowledge and belief.	_ /	
15		7/24 (Dat	<u>~18</u>
(Signature of lobbyi	3)	' (Dat	(e)
(Print Name of lobb	yist)		

#### P L E A S E P R 1 N

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#### STATE OF NEW HAMPSHIRE



#### **Lobbyists Fees and Expenses** Addendum A

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**NEW HAMPSHIRE** DEPARTMENT OF STATE

(RSA Chapter 15:6)

I. N	lame of Lobbyist(s) Dano Scalco	
II. I	Name of lobbyist's partnership, firm or corporation, if any:	
	The Professional Fire Fighter of New	Hampshire
	(Name of partnership, firm or corporation)	<del></del>
Ш.	Name of Client	Date
Indi to le incl	Fees Received icate the gross amount of all fees received from the client identified above obbying, including fees for services such as public advocacy, government uding research, monitoring legislation, and related legal work. The graced by any expenses:	relations, or public relations services
a) î	Total of all fees received in this reporting period	a) \$ <u>5</u> 866.39
b)	Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	a) \$ <u>5,866.39</u> b) \$ <u>9685.62</u> ear)
c)	Total of all fees received to date (Add lines a and b)	c)\$ 15,551.41
d)	Indicate the amount of any such fees that are due, but have not yet been paid	d) \$(\sqrt{\sq}}}}}}}}} \end{\sqrt{\sq}}}}}}}} \end{\sqrt{\sq}}}}}}}}}}} \end{\sqrt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}}}} \end{\sqnt{\sqnt{\sqrt{\sqrt{\sqrt{\sq}}}}}}}} \end{\sqit{\sqrt{\sq}\sqrt{\sqrt{\sq}}}}}}}}} \sqnt{\sqnt{\sqrt{\sqrt{\sqrt{\sqrt{\sq

V. Expenses:

Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$ _	Φ	_
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ _	Ø	
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	Ø	

e) \$
Amount:
Amount: (2) (2) (3) (3) (3) (3)
\$ \$ \$
\$
that the foregoing information  7/24/18 (Date)

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

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JUL 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

# Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying pa	rtnership, firm, or corpo	ration: The Hotession	nal Fire Fighters of NI	+
			corporation and not related to any	
particular client):	- <del></del>			
Date of Report (check	cone):			
April 25, 2018 □	July 25, 2018 🗹	October 31, 2018 🗆	January 30, 2019 □	
I have read RSA 15, I the following Addend submitted):	RSA 15-B, RSA 664, th lums submitted with tha	e Statement of Income ar it Statement (insert the n	nd Expenses described above, and umber of Addendum forms being	) ;
Addendum A(	s).			
Addendum B(	s).			
Addendum C(	s).			
I hereby swear or affir complete to the best of	m that the foregoing inf my knowledge and beli	formation on the Statemer lef.	nt and each Addendum is true and	İ
(Signature of lobbyist)	2		7/24/18 (Daté)	
David	Scalco			
(Print Name of lobbyis	st)	<del></del>		